

Docket No.: ICUMM.011C8CS

Customer No.: 20,995

AMENDMENT / RESPONSE TRANSMITTAL

Applicant : George A. Lopez
 App. No. : 10/630,131
 Filed : July 30, 2003
 For : MEDICAL VALVE AND
 METHOD OF USE
 Examiner : N. Lucchesi
 Art Unit : 3763

CERTIFICATE OF RAX TRANSMISSION
PTO CENTRALIZED FAX

I hereby certify that this correspondence and all
 marked attachments are being transmitted via
 facsimile to the USPTO centralized Fax No.
 (703) 872-9306 on the date shown below:

January 26, 2005

(Date)

Paul Conover

Paul N. Conover, Reg. No. 44,087

Mail Stop Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:

Preliminary Amendment in 11 pages.

The fee has been calculated as shown below:

FEE CALCULATION				
FEE TYPE	FEE CODE		CALCULATION	TOTAL
Total Claims	95 - 24 = 71	1202 (\$50)	71 x 50 =	\$3,550
Independent Claims	3 - 3 = 0	1201 (\$200)	0 x 0 =	50
			TOTAL FEE DUE	\$3,550

- Charge \$3,550 to Deposit Account No. 11-1410
- Return prepaid postcard.
- Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.

Paul Conover

Paul N. Conover
 Registration No. 44,087
 Attorney of Record
 Customer No. 20,995
 (949) 760-0404

PNC-5098.DOC#012603